FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1		(See instruction	_		Office use only	
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5		
COMMITTEE	FOR LEADERSHI	P, AND, PROGRES	SS			
ADDRESS (number and	PO E	3OX 31107				
_						
(Check if add is changed)		HESDA		MD	20824   1107	
			CITY	STATE	ZIP CODE 📥	
COMMITTEE'S E-MA					1	
COMMITTEE'S WEB	PAGE ADDRESS (L	<u>                                     </u>				
None	T AGE ADDITESS (C	( ( )			1	
2. DATE 0.1	M / D D / Y	2007 <sup>°</sup>				
3. FEC IDENTIFICATION NUMBER C C00366666						
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)						
I certify that I have exam	nined this Statement and	I to the best of my know	vledge and belief it is true, correct	and complete		
Type or Print Name of	f Treasurer	Tanya Prescott				
Signature of Treasure	r Electronically File	d by <b>Tanya Pres</b>	scott	Date 0 1	17 Y 2007	
NOTE: Submission of fa			subject the person signing this St	·	es of 2 U.S.C. S437g.	
Office Use Only			For further information Federal Election Commit Toll Free 800-424-9530	ission	FEC FORM 1 (Revised 02/2003)	

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5.	PE OF COMMITTEE (Check One)						
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)						
	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
	Name of Candidate						
	Candidate Party Affiliation Office Sought: House Senate President	State District					
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate						
		Democratic, Republican,etc.) Party.					
	(e) This committee is a separate segregated fund						
	(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee.	fund or party					
3.	Name of Any Connected Organization or Affiliated Committee						
L	None						
l		<b>.</b>					
_	Mailian Address						
	Mailing Address						
	CITY▲ STATE ▲	ZIP CODE					
	Relationship None						
	Type of Connected Organization:						
	Corporation Corporation w/o Capital Stock Labor Organiza	ation					
	Membership Organization Trade Association Cooperative						

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Write or Type Committee Name

	COMMITTEE FOR LEADERSHIP AND PROGRESS  Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.					
Full Name	Janica I	Kyriacopoulos				
Mailing Address	5	5304 McKinley Street				
		Bethesda		20814		
Title or Position	<b>V</b>	CITY A	STATE▲	ZIP CODE A		
	Custodian		Telephone number			
<b>Treasurer:</b> List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).						
Full Name of Treasurer	Tanya P	rescott				
Mailing Address	3	1133 Connecticut Avenue, I	NW			
		Washington	DC	20036		
Title or Position	<b>V</b>	CITY A	STATE	ZIP CODE ▲		
Title or Position	<b>∀</b> Treasurer		STATE▲ Telephone number	ZIP CODE ▲		
Title or Position  Full Name of Designated Agent	·			ZIP CODE <b>A</b>		
Full Name of Designated	Treasurer  Tanya P		Telephone number	ZIP CODE <b>A</b>		
Full Name of Designated Agent	Treasurer  Tanya P	rescott	Telephone number	ZIP CODE A		
Full Name of Designated Agent	Treasurer Tanya P	rescott 1133 Connecticut Avenue, I	Telephone number			

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9.	Banks or Other Depositories safety deposit boxes or maintai	counts, rents	
	Name of Bank, Depository, etc.		
	Bank o	of America	
	Mailing Address	730 15th Street, NW	
		Washington DC 2	20005
		CITY 🛆 STATE 🗸	ZIP CODE △